



LPR TEAM ROSTER

Liberty Parks & Rec Sports Leagues

Team Name:	
Head Coach Name:	
Coach Email/ phone #	email: phone:
Assistant Coach Name	
Assistant Coach Email / phone #	email: phone:
League/Age Group:	
Division:	
Price Per Player:	

PARTICIPANT RELEASE

As a participant in the City of Liberty Sports Program, I recognize and acknowledge that there are certain risks of a physical injury including, but not limited to, permanent disability or death: which may be sustained as a result of participating in any and all activities associated with the City of Liberty Recreation Programs. I further recognize and acknowledge that all activities involving strenuous exertion or potential body harm are hazardous recreational activities and involve substantial risk of injury. I am relieving the City of Liberty of any and all liability of such loss, damage, or death. I also grant full permission for mine or my teams photographs to be used for any publicity and marketing purpose for the City of Liberty.

Rosters are frozen at time of first game. Additions to the rosters must be approved by league coordinator.

	PLAYER NAME	DOB	GUARDIAN NAME	EMAIL ADDRESS	PARENT SIGNATURE	PAYMENT
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						

I, _____ was given copies of the Letters of Commitment & Expectations for Coaches, Players, and Parents and will discuss the letters with my team prior to the

(Head Coach Signature)

TOTAL DUE: \$_____ x _____ players

\$

SUBMITTING YOUR ROSTER

After you have completed the form, please return to the sports coordinator for this program or mail to Fountain Bluff Sports Complex, 2200 Old State Hwy 210, Liberty, MO 64068

Once your roster has been received, you will be contacted to confirm the information and the coordinator will register your team and collect the payment.